## MARRIAGE INTENTION APPLICATION FORM – BLACK INK ONLY

CITY USE ONLY: - INT. NO.\_\_\_

Please Print:	Please Print:
Party A (Groom)	Party B (Bride)    First Middle Last
Surname To Be Used After Marriage	Surname To Be Used After Marriage
SS#//	SS#//
Age Date of Birth//	Age Date of Birth//
Occupation	Occupation
I'm In: Law Enforcement; Public Safety; Family Planning; Victim of Crime/Violence	I'm In: Law Enforcement; Public Safety; Family Planning; Victim of Crime/Violence
Residence/	Residence/
Number Street	Number Street
CityState/CountryZip	CityState/CountryZip
Marriage No. 1 <sup>st</sup> 2 <sup>nd</sup> 3 <sup>rd</sup> etc.	Marriage No. 1 <sup>st</sup> 2 <sup>nd</sup> 3 <sup>rd</sup> etc.
If not 1 <sup>st</sup> status of last: Widowed Divorced (Circle One)	If not 1 <sup>st</sup> status of last: Widowed Divorced (Circle One)
Am/was member of: Civil Union Domestic Partnership (Circle One)	Am/was member of: Civil Union Domestic Partnership (Circle One)
State/Country	State/Country
If so, Dissolved? YesNo	If so, Dissolved? YesNo
Void/Annulled/Court Order Void by GL c. 207 Law	Void/Annulled/Court Order Void by GL c. 207 Law
Birthplace: City State/Country	Birthplace: City State/Country
Mother's Name/	Mother's Name/
First Middle Last Surname/Maiden	First Middle Last Surname/Maide
Father's Name / Surname/Maiden	Father's Name/
Were Your Parents Married at the Time of your Birth? Yes No	Were Your Parents Married at the Time of your Birth? Yes No
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Sex: Male Female (Circle One) Related by Blood? Yes No (Circle One)	Sex: Male Female (Circle One) Related by Blood? Yes No (Circle One)
If Yes How?	If Yes How?
Telephone #/	Telephone #/
Signature	Signature1-12 REV